FORM D

1178078 UNITED STATES

SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# 76 95 1

# FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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Prefix	1	Serial
DA	TE RECEIV	ED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)
Technology Management, Inc. Offering of Class B Non-Voting Common Stock
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)
Technology Management, Inc.
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
9718 Lake Share Blvd, Cleveland, Ohio 44108 (216) 541-1000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code)
(if different from Executive Offices)
Brief Description of Business , // PROCES
Fuel cell research and development.
Type of Business Organization  JUL 1 2 2
orporation
business trust limited partnership, to be formed
Month Year FINANCIA
Actual or Estimated Date of Incorporation or Organization: 0 5 8 4 🛛 Actual 🔲 Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:
CN for Canada: FN for other foreign jurisdiction)

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it was received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Memorandum (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### - ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

			A. BASIC IDENTI	FICA	TION DATA						
2. Enter the information requ	ested for the follow	ving:									
<ul> <li>Each promoter of the i</li> </ul>											
<ul> <li>Each beneficial owner the issuer;</li> </ul>											
<ul> <li>Each executive officer</li> </ul>	and director of cor	pora	te issuers and of corp	orate g	general and managing	g partne	ers of partne	rship is	ssuers; and		
Each general and mana	aging partner of par	tners	ship issuers.								
Check Box(es) that Apply:	Promoter	☒	Beneficial Owner	$\boxtimes$	Executive Officer	$\boxtimes$	Director		General and/or Managing Partner		
Full Name (Last name first, if ir	ndividual)										
Benson P. Lee											
Business or Residence Address	(Number and Street,	City	, State, Zip Code)								
9718 Lake Share Blvd, Cleve	eland, Ohio 44108										
Check Box(es) that Apply:	Promoter		Beneficial Owner	$\boxtimes$	Executive Officer		Director		General and/or Managing Partner		
Full Name (Last name first, if ir	ndividual)										
Michael A. Petrik											
Business or Residence Address	(Number and Street,	City	, State, Zip Code)								
9718 Lake Share Blvd, Cleve	eland, Ohio 44108										
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner		
Full Name (Last name first, if in	ndividual)		-								
Dr. Robert C. Ruhl											
Business or Residence Address	(Number and Street,	City	, State, Zip Code)								
9718 Lake Share Blvd, Cleve	eland, Ohio 44108										
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	⊠	Director		General and/or Managing Partner		
Full Name (Last name first, if in	idividual)										
Dr. Steven J. Bomba											
Business or Residence Address	(Number and Street,	City	, State, Zip Code)								
9718 Lake Share Blvd, Cleve	eland, Ohio 44108										
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	☒	Director		General and/or Managing Partner		
Full Name (Last name first, if in	ıdividual)										
C. Richard Lynham									<del> </del>		
Business or Residence Address		City	, State, Zip Code)								
9718 Lake Share Blvd, Cleve	land, Ohio 44108										
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner		
Full Name (Last name first, if in	dividual)										
Business or Residence Address	(Number and Street,	City	, State, Zip Code)								

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

					В.	INFORMA	TION ABO	OUT OFFE	RING					
_	II (1		11 1										Yes	No
1.	Has ti	ne issuer so	id, or does u	ne issuer inte Answ	nd to sell, to er also in A <sub>l</sub>	non-accreai ppendix, Col	umn 2, if fili	in this offer ing under UL	nng? .OE.				$\boxtimes$	
										\$25,0	00*			
Y									Yes	No				
3.	Does	the offering	g permit join	t ownership	of a single u	nit?		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						$\boxtimes$
4.	remur persor than f	neration for n or agent o	solicitation of a broker o	of purchaser r dealer regi	s in connect stered with t	ion with sale he SEC and/	es of securiti or with a sta	es in the offe ite or states,	ering. If a polist the name	erson to be li	ommission or isted is an as er or dealer. on for that b	sociated If more		
Full	Name	(Last nam	e first, if in	dividual)										
	N/A				_									
Bus	iness c	or Residenc	e Address (	Number and	I Street, Cit	y, State, Zip	Code)							
Nan	ne of A	ssociated	Broker or D	ealer										
Stat	es in V	Vhich Pers	on Listed H	as Solicited	or Intends t	o Solicit Pu	rchasers		······					
	(Chec	k "All Sta	tes" or chec	k individual	States)	•••••	******************		• • • • • • • • • • • • • • • • • • • •			[	] All S	States
[ A	L]	[ AK ]	[ AZ ]	[ AR ]	[ CA ]	[ CO ]	[ CT ]	[ DE ]	[ DC ]	[ FL ]	[ GA ]	[ HI ]	] [	ID ]
[ ]]	L ]	[ IN ]	[ IA ]	[ KS ]	[ KY ]	[ LA ]	[ ME ]	[ MD ]	[ MA ]	[ MI ]	[ MN ]	[ MS ]	[ N	MO ]
[ M	T ]	[ NE ]	[ NV ]	[ NH ]	[ NJ ]	[ NM ]	[ NY ]	[ NC ]	[ ND ]	[ OH ]	[ OK ]	[ OR ]	[ ]	PA ]
[ R	I ]	[ SC ]	[ SD ]	[ TN ]	[ TX ]	[ UT ]	[ VT ]	[ VA ]	[ WA ]	[ WV ]	[ WI ]	[ WY ]	[ ]	PR ]
Full	Name	(Last nam	e first, if in	dividual)										
Bus	iness o	or Residenc	e Address (	Number and	d Street, Cit	y, State, Zip	Code)							
Nan	ne of A	Associated	Broker or D	ealer	***									
Stat	es in V	Which Perso	on Listed H	as Solicited	or Intends t	o Solicit Pu	rchasers							
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ſΑ	•	[ AK ]	[ AZ ]	[ AR ]	[CA]	[ CO ]	[ CT ]	[DE]			[GA]	( HI ]		ID ]
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[ M	-	[NE]	[ NV ]	[ NH ]	[ NJ ]	[ NM ]	[ NY ]	[NC]	[ND]	[ OH ]	[ OK ]	[ OR ]		PA ]
[ R	-	[SC]	[SD]	[TN]	[ TX ]	[UT]	[VT]	[VA]	[ WA ]	[WV]	[WI]	[ WY ]		PR]
			e first, if in			<u> </u>		<u> </u>						
		(======================================	,											
	,	D 11	4.11		1.0 0	0	0.1)				_			
Bus	iness o	r Kesidenc	e Address (	Number and	1 Street, Cit	y, State, Zip	Code							
Nan	ne of A	ssociated	Broker or D	ealer							<del></del>			
	· · · · · · · · · · · · · · · · · · ·													
Stat	es in V	Vhich Perso	on Listed H	as Solicited	or Intends t	o Solicit Pu	rchasers							
	(Chec	k "All Sta	tes" or chec	k individual	States)							[	] All S	tates
[ A	L]	[ AK ]	[ AZ ]	[ AR ]	[ CA ]	[ CO ]	[ CT ]	[ DE ]	[ DC ]	[ FL ]	[ GA ]	[ HI ]	[ ]	ID ]
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[ R	I ]	[ SC ]	[ SD ]	[ TN ]	[ TX ]	[ UT ]	[ VT ]	[ VA ]	[ WA ]	[ WV ]	[ WI ]	[ WY ]	[ ]	PR ]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

<sup>\*</sup> The Company has the discretion to accept subscriptions in amounts less than \$25,000.

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \sum and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.					
	Type of Security	Aggregate Offering Price		· An	nount A Solo	
	Debt	\$		\$		)
	Equity	\$ 2,500,000		\$	112,50	00
	□ Preferred					
	Convertible Securities (including warrants)	\$0-	_	\$_	-0	)-
	Partnership Interests	\$		\$_	-0	)
	Other (Specify	\$		\$_	-0	)-
	Total	\$ 2,500,000	<u>-</u>	\$	112,50	00
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		D	Aggreg ollar Ar of Purch	nount
	Accredited Investors	1	_	\$	100,00	00
	Non-accredited Investors	11		\$	12,500	0
	Total (for filings under rule 504 only)	N/A		\$	N/A	
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.					
		Type of		D	ollar Ar	
	Type of offering	Security			Sold	
	Rule 505	N/A	_	\$_	N	/A
	Regulation A	N/A	_	\$_	N	/A
	Rule 504	N/A	_	\$_	N	/A
	Total	N/A	_	\$_	N	/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			\$_	(	0-
	Printing and Engraving Costs		$\boxtimes$	\$_	5	00
	Legal Fees		$\boxtimes$	\$_	14,5	00
	Accounting Fees		$\boxtimes$	\$_	5,0	00
	Engineering Fees			\$_	-(	0-
	Sales Commissions (specify finders' fees separately)			\$_	1	0-
	Other Expenses (identify):			\$_	-(	0-
	Total		$\boxtimes$	\$_	20,0	00

	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE	OF PROC	EEDS		
	b. Enter the difference between the aggregate offerin tion I and total expenses furnished in response to Pa "adjusted gross proceeds to the issuer."	rt C – Question 4.a. This difference is the			\$2,480	0.000
5.	Indicate below the amount of the adjusted gross pro- used for each of the purposes shown. If the amoun estimate and check the box to the left of the estimate. the adjusted gross proceeds to the issuer set forth in res	t for any purpose is not known, furnish an The total of the payments listed must equal				
			Payme Offic Directo Affili	ers, ors, &	•	ents to
	Salaries and fees		□ \$	-0-	□ \$	-0-
	Purchase of real estate		□ \$	-0-	□ \$	-0-
	Purchase, rental or leasing and installation of mac	hinery and equipment	□ <b>\$</b>	-0	□ \$	-0-
	Construction or leasing of plant buildings and fac	ilities	□ \$	-0-	□ \$	-0
	Acquisition of other businesses (including the val offering that may be used in exchange for the asso	ets or securities of another				
	issuer pursuant to a merger)		□ \$	-0-	□ \$	0
	Repayment of indebtedness		□ \$	-0-	□ \$	-0-
	Working capital		□ \$	-0-	<b>⊠</b> \$ <u>2</u> .	480,000
	Other (specify):		□ \$	-0-	□ \$	<b>-</b> 0-
	Column Totals		<b>\$</b>	-0-	□ \$_ <u></u>	-0-
	Total Payments Listed (column totals added)		<b>⊠</b> \$ <u>2,4</u>	80,000		
		D. FEDERAL SIGNATURE				
ollo	issuer has duly caused this notice to be signed by swing signature constitutes an undertaking by the ist of its staff, the information furnished by the issuer	ssuer to furnish to the U.S. Securities and	Exchange (	Commissi	on, upon v	
ssu	er (Print or Type)	Signature R		Date	1.100	_
Гес	hnology Management, Inc.	Den T. La			11/05	
	e of Signer (Print or Type)	Title of Signer (Print or Type)				-
Ben	son P. Lee	President and CEO				

	E. STATE SIGNATURE									
1.	l. Is any party described in 17 CFR 230.262 present of such rule?	tly subject to any of the disqualification provisions Yes No								
	See Appendix	, Column 5, for state response.								
2.	2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	<ol> <li>The undersigned issuer hereby undertakes to furnish to issuer to offerees.</li> </ol>	, , , , , , , , , , , , , , , , , , ,								
4.	4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.									
Iss	ssuer (Print or Type) Sign	ature R Date / /								
Te	Fechnology Management, Inc.	Deun P. Lan 7/1/05								
Na	Name of Signer (Print or Type)  Title of Signer (Print or Type)									

**President and CEO** 

#### Instruction:

Benson P. Lee

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# APPENDIX

1	2		3	3 4								
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No			
AL												
AK	-											
AZ												
AR												
CA		X	Class B Stock, \$12.50/share									
СО		X	Class B Stock, \$12.50/share									
CT		X	Class B Stock, \$12.50/share									
DE			,									
DC												
FL		X	Class B Stock, \$12.50/share									
GA												
HI						N						
ID												
IL								•				
IN		X	Class B Stock, \$12.50/share									
IA												
KS												
KY												
LA												
ME												
MD		X	Class B Stock, \$12.50/share									
MA												
MI		X	Class B Stock, \$12.50/share									
MN												
MS												
МО												

# APPENDIX

1	2		2 3 4								
	to non-a	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
MT			•								
NE											
NV											
NH											
NJ		X	Class B Stock, \$12.50/share								
NM											
NY		X	Class B Stock, \$12.50/share								
NC											
ND											
ОН	X		Class B Stock, \$12.50/share	1	100,000	1	12,500				
OK											
OR											
PA					- Marie						
RI											
SC											
SD		,_,_									
TN											
TX											
UT											
VT											
VA		X	Class B Stock, \$12.50/share								
WA		X	Class B Stock, \$12.50/share								
WV											
WI		х	Class B Stock, \$12.50/share	-							
WY				·							
PR											